

**PART I – REQUEST TO DISCONTINUE REPRINTS**

- **AGENCY REPRESENTATIVE SHOULD FILL IN REQUESTED INFORMATION, SIGN AND DATE THE REQUEST FORM AND FORWARD FIRST PAGE ONLY TO THE OFFICE OF BACKGROUND INVESTIGATIONS (OBI). REQUEST FORM MAY BE FORWARDED BY MAIL OR FAX (804-726-7095).**
- **FINGERPRINTS MUST HAVE BEEN REJECTED AT LEAST THREE TIMES BY THE STATE POLICE AND/OR AT LEAST TWO TIMES BY THE FBI PRIOR TO SUBMITTING THIS REQUEST. IN ADDITION, MORE THAN ONE PERSON SHOULD HAVE TRIED TO OBTAIN GOOD PRINTS.**

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TO: OFFICE OF BACKGROUND INVESTIGATIONS (OBI) FAX#: 804-726-7095

FROM: \_\_\_\_\_ FAX #: \_\_\_\_\_

APPLICANT'S NAME: \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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PLEASE CIRCLE THE AGENCY WHOSE REPRINTS YOU WISH TO TERMINATE:

STATE POLICE      FBI      BOTH

- **IF YOU ARE REQUESTING THE DISCONTINUANCE OF FINGERPRINT CARDS FOR ONLY ONE AGENCY, E.G. STATE POLICE, FILL OUT ONLY THE QUESTIONS PERTAINING TO THAT AGENCY AND ENTER N/A IN THE AREAS PERTAINING TO THE FBI FINGERPRINTS.**

State Police: Number of times rejected: \_\_\_\_\_ Number of persons taking fingerprints: \_\_\_\_\_

List names of persons taking fingerprints: \_\_\_\_\_

FBI: Number of times rejected: \_\_\_\_\_ Number of persons taking fingerprints: \_\_\_\_\_

List names of persons taking fingerprints: \_\_\_\_\_

\_\_\_\_\_  
(Agency Representative's Signature)

\_\_\_\_\_  
(Date)

(Continued on Reverse)

**PART II – OFFICE OF BACKGROUND INVESTIGATIONS WORKSHEET**

**OBI USE ONLY**

APPLICANT'S NAME: \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Alias (es) shown on fingerprint cards: Yes No N/A

Results of FBI fingerprint check received: Yes No

Results of State Police fingerprint check received: Yes No

FBI screening results: \_\_\_\_\_

State Police screening results: \_\_\_\_\_

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The information provided by the facility regarding the number of times rejected is: Correct Incorrect

Discrepancy (if any): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Permission was not given to discontinue reprints for reason(s) shown  
Above (Circle one or both): State Police FBI

\_\_\_\_\_ Permission was given to discontinue reprints through (Circle one or both): State Police FBI

Name check has been requested on \_\_\_\_\_

Name check was received on \_\_\_\_\_

Applicant was: Check one: Eligible ☐ Not Eligible ☐ Adequate Information Unavailable ☐

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
(OBI Representative's Signature)

\_\_\_\_\_  
(Date)